United States District Court

for the

Southern District of Georgia

Savannah Division

) Case No.	CV 423-039
Plaintiff(s) (Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.) -V-))))))))))	(to be filled in by the Clerk's Office)
Defendant(s) (Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)))))	

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

I. The Parties to This Complaint

A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

ADRIAN L. BRINSON Name All other names by which you have been known: GRAHAM LAMAR ID Number 1171205 Current Institution Centeral State Prison Address 1400 GA MACON 31201 City State Zip Code

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. Make sure that the defendant(s) listed below are identical to those contained in the above caption. For an individual defendant, include the person's job or title (if known) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

Defendant No. 1	
Name	Sanc Doc #1 AKA Strickland Haylor
Job or Title (if known)	officer
Shield Number	~/A
Employer	Ga. Dept of corrections (Coastalsp)
Address	PO. BOX 7150
	Garden C.ty Ga. State Zip Code
	Individual capacity Official capacity
	only and
Defendant No. 2	
Name	Br. Hany Beard
Job or Title (if known)	Lt.
Shield Number	NA
Employer	Ga. Dept of Corrections (coastal SP)
Address	P.O. Box 7150
	Garden City Ga. State Zip Code
	Individual capacity Official capacity
	only
	, , , , ,

Pro Se 1	4 (Rev. 12/	16) Complaint for Violation of Civil Rights (Prison	rer)
	· (con 12)	Defendant No. 3 Name Job or Title (if known) Shield Number Employer Address	SGT. NIA Ga. Dept of Corrections (Constal S. D.o. Box 7150 Garden C.t., Ga. City State Zip Code Individual capacity Official capacity
		Defendant No. 4	only one
		Name Job or Title (if known) Shield Number Employer Address	Jane Doe #3 AKA Krugler Dopty worden of care is treatment NIA Gn. Dept of corrections Coastal SP P.O. Box 7,50
II.	Basis	for Jurisdiction	Garden C.t., Ga. State Zip Code Individual capacity Only
	immu Feder	nities secured by the Constitution and	e or local officials for the "deprivation of any rights, privileges, or defederal laws]." Under <i>Bivens v. Six Unknown Named Agents of (1971)</i> , you may sue federal officials for the violation of certain
	A.	Are you bringing suit against (check Federal officials (a Bivens clair State or local officials (a § 198	im)
	В.	the Constitution and [federal laws].	g the "deprivation of any rights, privileges, or immunities secured by ." 42 U.S.C. § 1983. If you are suing under section 1983, what ight(s) do you claim is/are being violated by state or local officials? Sthendard Procedural Due process medical her

Plaintiffs suing under *Bivens* may only recover for the violation of certain constitutional rights. If you are suing under *Bivens*, what constitutional right(s) do you claim is/are being violated by federal

C.

officials?

Page 3 of 11

	\ \
Defendant	list
C E MOIT	1101

- 1. Officer Strickland AKA taylor Coastals state prison 100
- 2. Brittony Beard SGT Coastal state Prison
- 3. Depty worden of C3T knyler Coastal State Prison
- 4. SGT Gillison Coastal State Prison
- 5. Derrick Davis (Innate) B.B.
 Central State Prison
 4600 Fulton Mill Rd.
 macon Ga.
- 6. Kyle Latter AKA money (Inmote) Ware State Prison
- 7. Herrance mysich alle totton Innate

Case 4:23-cv-00039-WTM-CLR Document 21-1 Filed 07/24/23 Page 5 of 33

Withness 1.st

1. Alvinesia Davis

2. Derylmaize Sackson

3. Special GBI agent John Doc#1

4. Counselor macles (coastol)

5. MS Ivey

6. Creative witing class

7. John Dor # 2

8- SGT Richardson

9. Tolive

10. Trey

11. ms Parker (Coastal)

12. Kalphrel Hogen 1062551998

13. Adamson Sacobs 166308125

14. Counselor moore (Coastal)

15 See Brown

16. mailroom officer (Coastal)

17- mailroom officer (Central)

18. SGT Gobbs (Coastal)

19. Big C (Coastal)

20. 1559c gires

21. SET Quant (Coastal)

23. Lt. Brown (Coastal)

Case 4:23-cv-00039-WTM-CLR Document 21-1 Filed 07/24/23 Page 6 of 33 Lillre Poole charle Baldwin 24 unt manger mg Sorolan (central) 25-Courselos Hudggins 26. und manger me call (central) 27. Lt. Gicen Central 28-DUCT Passon chembers 29. 6. Sampson marden (Central) 30. Counselor fields (Central) 31. myron Jones Central 32. Consolon tilman mental Health 33 Doc Sunsan mental 34. Huatth

35. Ms Katkins malison central

or order

o Se 1	4 (Rev. 12/1	6) Complaint for Violation of Civil Rights (Prisoner)
	D.	Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under Bivens, explain how each defendant acted under color of federal law. Attach additional pages if needed. Each Oefendants are employeed by the Ga. Oept. of corrections and therefore acts under color of state law having sworn each to protect and keep each inmate safe and free from harm and creek and musal punishment.
I.	Prison	ner Status
	Indica	te whether you are a prisoner or other confined person as follows (check all that apply):
		Pretrial detainee
		Civilly committed detainee
		Immigration detainee
14		Convicted and sentenced state prisoner
		Convicted and sentenced federal prisoner
		Other (explain)
7.	Statem	ent of Claim
	alleged further any cas	s briefly as possible the facts of your case. Describe how each defendant was personally involved in the wrongful action, along with the dates and locations of all relevant events. You may wish to include details such as the names of other persons involved in the events giving rise to your claims. Do not cite es or statutes. If more than one claim is asserted, number each claim and write a short and plain ent of each claim in a separate paragraph. Attach additional pages if needed.
	A.	If the events giving rise to your claim arose outside an institution, describe where and when they arose. The stratland on nov 16th 2022 @ 2.38 pm I was a Hacke by s immates infront of N building at Coastal stat forson officer stratland natched and elin of not res report the incident of after nedical treatment
	В.	If the events giving rise to your claim arose in an institution, describe where and when they arose. Con Earstal State Prison in Garden City Ga. Front of N building.

Statement of Claim: On Nov 16th 2022 2:38 pm location Coastal State Prison N building front of building. Defendent strickland called plaintiff outside to be assulted by immates Derrick Dans and kyle malker AKA money hungry. officer strickland matched the assult from feet away did not respond help assist or break up the incident. As Plaintiff ran from attackers another group of innates attacked Plaintiff. During the incident officer strictland did not respond in any kind of way and did not offer medical attention to Plaintiff innates Adamson Sacobs GOC## 100308125 3 hapheil Hogan GDC # 100 255 1984 withness the ottack @ 7.15 am innate Trey withnessne officer strickland talking to innate doe Bran Stateing that a hit was on a mustin today in which plaintiff Brinson is a mustin weeks prion to the assult on now 16th SGT Beard and Strickland had made threats of violence toward Brinson because Brason is a suspect in a morder investigation of a bamborely Go teen when is relateded to SGT Beard. Brisish threated to excepts Beard and Strickland Beard. Donien threated to empose own illegal aftituations at his Creative writing class. In neturn Plaintiff was attacked by afficer stacklard boyth, and money mingry Akk Myle walker and SGT Beard boyth, and and classin ate BB AKA Derived Dans. After The incident SGT Gill. Son and Depty warden of Care and treatment kngler Denied Plaintiff protective Custody and nedocal attention. Plaintiff was never seen by medical. On nov 22 2022 Claim 2. Plaintiff was placed in isolation by Sort Gillion and kingler for no reason. SGT Gillion in the was for bothering SGT Brand. I was placed in the last him in the Lote by Durant and Big C whom withway

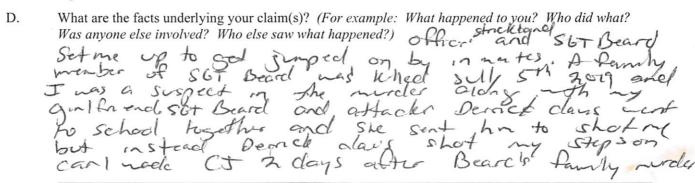
Brinson claims that being placed in hole forms no reason was retaliction. Brinson spent the night in a cold cell with no property nomat no blanket Cruel and univsal punishment. On now 22 2022,

Claim 3: On now 23 2022 I filed agrieve with P. willians in the morning and in the afternoon Gillison retaliated on me by Changeing my room to a room upstairs. I told officer Big C all the guys that surped on me are up there and he said that SET gillison said I had to go in on She was going to Come Spray me So I went inside, 20 mins later Big C Came back and Sord Gillison Said it's the wrong room. I was placed in another room with issac grimes. Before Shift change He attacked me. No officer Came to my aid when I Screened willie poole the orderly care but said the officer told him to Stay from up there. note I was denied medical attention spent + weeks on lockdown.

Claim 4. Inmate grimes I assic was paid \$1000 on his girlfriend apple pay to take care of me after transfer from Coastal he went to Johnson stayed there 2 months and was transferred to central where I am. 2 weeks later Demick Don's and extra arrive and end up in the

Same Dorm S-1 Grimes was suppose to do the Job right but he didn't so he was transferred to telfare state prison a Leve 5 days before going home. Brinson Claim that inmates Deinek Davis and other inmates has threaten Brison and are at the Same prison.

C.	What date a	nd approxima	te time did the e	vents giving rise to your	claim(s) occur?	
	nov	LLTA	2022	Attacked &	y innato	
	nov	32	2020	vents giving rise to your PHAcked & Refall Acd	placed in	hole
	See	time	line			
	(See	time	line)			



V. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

Plant: He recieved 4 mch cut on right hand backside Plaintiff hose was broken on now 16th 2022 incident, Plaintiff also recieved neck and back injuries and St.11 having pains. After now 16th 2022 incident Plaintiff was refused medical attention after the incident and never seen medical again. Plaintiff didn't recieve any medical treatment until Dec 4th transfer medical intuke @ central state prison Plantiff has suffered from pts0 and other mental illness due to the now 16 inventants and transferad.

VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

I ask that the courts grates relief in the amount of Minilian dollars for the injures and clananges sustainted on now 16th nown.

Incredent Ask that the courts arelen the Ga Dept of corrections to remote safety standards for inmates and remote classification standards to better organize innates for protections. and some of the formation ask that All Defendants resign their post tons

of the Gooc.

Timeline of Events

July 5th "19 L4 Beards relative killed in thomasville Ga. BBCDavis) shot my stepson carl made in thomasule July 7th 19 Aug 6th 19 arrested in tallahassee fla in stalen car from Bainbridge: as Spoke to mache 3 as Pleater about beard, refused PC by Richardson Oct 28th 22. Beard asked for one on one with me after conversation B.B. pulled up on me talking about taking things in his own hands Refused PR by Richardson oct 30th 22 Beard offered a can of tabaccoo for my Silence Refused Plc by beard 11:45an Nov 8th 22 streklard and beard found me on the yard and beard went off on me. nou 15th 22 exsposed strickland and beard illigal othership in creating weiting class in a short Story now 16th 22 Sumpeol on by innates on front of stricklands after she pointed me out to BB? alken refused PIC and medical attention. Attackers placed in hoke how 17th az strickland fire now 22 22 gillison nach threat of last clay breathing now 23 22 Grenance filed with Philliams. now 23 22 Gillison change my room to a room upstains around my affectives. 30 mms later Gillison told Big C to pot me in the room, with 15590 grimes, grimes assulted me during shift change and the orderly willie poole was told not to go up there white I was screaning. grimes lake admits sat a bbs which is sat Gillisons Baby nother paid him a thousand on apple pay it was on apple pay. The officer world Bring him the phone and let him make Calls Glayedin hole I week and beckdom ot CSP I weeks) nov. 29th transferred to Central State Posson non. 30th Dorn placed on lock down Dec 8th 22 gets sent to Solvion. Dec 15thm faken off lockdown

Feb. 24 33 recred 1983 popus Feb 27th 23 timed in lawsit pages to busines office to be signed and retirmed march 3rd received recept but not lawful pages march Therete chambers (DW) about papers march 8th spoke to conselon Hysins nailroom and Sordan about paper march 9th spoke to worden then terred in gravance * never heard from Grance march 16th gomes transferred to central after only Staying at Johnson 90 days. April 27 23 Dans transferred to central walker Sert to ware State grison May 4th 23 incident in dorm with Dans and myricks ages said that his gF has money on my head Some 11 23 inmake Rico pord to kull Sine 25th 23 cosin chucky killed at ware State found dead with bank rate Sure alth 23 Lt comes to work Singing Sad fineral songs. Some 28th Can in dom diabled. June 29th fot grover fransfered to Jelfan clays before release because he chelat first ~ Jely 14th all lights on dean and

VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

A.	Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?
	Yes
	□ No
	If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).
	Coastal state Prison P.O. Box 7150 Garden City Gar. Central state Prison macon Ga.
В.	Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?
	Yes
	No No
	Do not know
C.	Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims? Yes
	□ No
	Do not know
	If yes, which claim(s)? The greenest that I wrote conceed all topics from the greenest that I wrote conceed all topics from the assult to the relation on by placed on the hole clenial of aced-cal attention retailation made by officers by gotting innates against me a central state price

D.	Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint?
	Yes
	□ No
	If no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?
	Yes
	□ No
E.	If you did file a grievance:
	1. Where did you file the grievance?
	Coastal state Prison (1-60/ation) P.O. Box 7150 Garden C.+1 Ga. NOV 28 2022
	Garden City Con.
	2. What did you claim in your grievance? refaliated against derived medical treatment Assulted on now 16th 2022
	threats made by SGT G.II.sun retal-ation and placed in 150 lation for no reason
	3. What was the result, if any?
	Greener rejected because a extra page nor added to the grievance
	4. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)
	I appended it all the way to the highest form and after they rejected if I appended it to the Ga Dept of corrections they rejected it to but I still appended it

Pro Se 14 (Rev.	. 12/16) Complain	t for Violation	of Civil Rights	(Prisoner)
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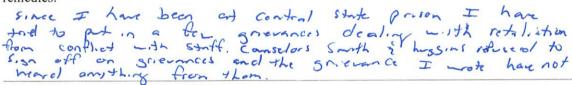
T7	T C	1. 1	. (*1	
F.	If voi	i did no	t file a	grievance

1. If there are any reasons why you did not file a grievance, state them here:

NA

If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any: Then I heard about the threats from 567 Beard I
talked to my mental health counselor me marker and the took me to unit manger of mental health Tim fletcher, ms. fletcher Stated that I would have to give names in I manted to make a seport. I agreed and told her my story and it never left the room on my behalf

G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.



(Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.)

VIII. Previous Lawsuits

The "three strikes rule" bars a prisoner from bringing a civil action or an appeal in federal court without paying the filing fee if that prisoner has "on three or more prior occasions, while incarcerated or detained in any facility, brought an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent danger of serious physical injury." 28 U.S.C. § 1915(g).

To the best of your knowledge, have you had a case dismissed based on this "three strikes rule"?

Yes

No

If yes, state which court dismissed your case, when this occurred, and attach a copy of the order if possible.

Gravance has not accepted by Central State prison Consilor Staff CONFIDENTIAL Attachment 1 5/10/19 Offender GRIEVANCE FORM (Facsimile) INSTITUTIONAL STAFF USE ONLY Brase OFFENDER NUMBER 117170\$ BASO GRIEVANCE NUMBER_ DATE COMPLETED FORM RECEIVED FROM OFFENDER ___/___BY DATE APPEAL RECEIVED / BY YOU MUST INCLUDE SPECIFIC INFORMATION CONCERNING YOUR GRIEVANCE TO INCLUDE DATE, NAMES OF PERSONS INVOLVED, AND RESOLUTION REQUESTED: Offender Signature_ is this grievance being filed within the 10-day time limit? Please answer Yes or No. If the answer is No, clease explain why. Courselan trelds RECEIPT FOR GRIEVANCE AT COUNSELOR'S LEVEL GDC I.D. #: OFFENDER'S NAME_ ACKNOWLEDGE RECEIPT OF GRIEVANCE FORM FROM THE ABOVE INMATE __/___/__COUNSELOR'S SIGNATURE __

Case 4:23-cv-00039-WTM-CLR Document 21-1 Filed 07/24/23 Page 17 of 33

Case 4:23-cv-00039-WTM-CLR Document 21-1 Filed 07/24/23 Page 18 of 33 Staff New reject-more pages SOP 227.02 Attachment 1 Offender GRIEVANCE FORM (Facsimile) 5/10/19 INSTITUTIONAL STAFF USE ONLY OFFENDER NAME BYMSON, ACTION OFFENDER NUMBER? INSTITUTION 100Stall S DATE COMPLETED FORM RECEIVED FROM OFFENDER. 11 33 DATE APPEAL RECEIVED: ... THIS FORM MUST BE COMPLETED IN INK. YOU MUST INCLUDE SPECIFIC INFORMATION CONCERNING YOUR GRIEVANCE TO INCLUDE DATES, NAMES OF PERSONS INVOLVED, AND WITNESSES. 16th of Nov 2023 along

Offender Signature

Date

Is this grievance being filed within the 10 day time limit? Please answer Yes or No. If the answer is No, please explain why.

Yes but I want to 4 counselors 1st and none would Sign it.

GOC 1171205

SOP 227.02 Attachment 4 5/10/19

WARDEN'S/SUPERINTENDENT'S GRIEVANCE RESPONSE

Offender's Name: Brinson, Adrian	Grievance Number: 346064
GDC #: 1171205	Facility: Coastal State Prison

RESPONSE TO GRIEVANCE:

Offender Brinson, Adrian GDC# 1171205, based on factual statement(s) provided: your grievance #346064 has been reviewed and you have since been transferred to Central State Prison as of 11/29/2022. However, regarding this issue of being assaulted; camera footage was reviewed and handle accordingly to policy and procedures. As you know information regarding other offender(s) and/or staff will not be discussed. Enclosing, your grievance will be rejected on the following reason (s):

Grievance contained extra pages other than those allotted and had writing on the backside of a page.

Warden's/Superintendent's Signature	12/10/22 (Date)
I ACKNOWLEDGE RECEIPT OF THE ABOVE RESPON	NSE ON THIS DATE:
Offender's Signature	(Date)
You have seven (7) calendar days within which to appear If the last day is not a business day at your institution, you day.	

Retention Schedule: Upon Completion, this form shall be maintained with the grievance packet for four (4) years and then destroyed.

WARDEN'S/SUPERINTENDENT'S REJECTED GRIEVANCE RESPONSE

Grievance Number: 346064

SOP 227.02 Attachment 11 5/10/19

GDC#: 1171205 Facility: Coastal State Prison This grievance revealed that you failed to follow the proper procedure for filing the formal grievance; therefore, this grievance is rejected for the following reason(s): Does not personally affect the offender. ☐ Matters over which the Department has no control, including parole decisions, sentences, probation revocations, court decisions, and any matters established by the laws of the state. Disciplinary actions, including any warnings, sanctions, fees, or assessments. The disciplinary appeal procedure is located in SOP 209.01, Offender Discipline. ☐ Involuntary assignments to Administrative Segregation. The procedure to appeal such assignment is located in SOP 209.06, Administrative Segregation. Q Co-pay charges assessed for health care. The procedure to appeal such charges is located in SOP 507.04.03, Offender Health Concerns or Complaints. Transfers of offenders between institutions. ☐ Housing assignments, program assignments, security classifications or work assignments, unless there is an alleged threat to the offender's health or safety. The procedure to appeal such assignments is located in SOP 220.03, Classification Committee. Special Religious Requests that request a special religious accommodation outside the accommodations allowed for by policy. The procedure to file a Special Religious Request is located in SOP 106.11, Religious Accommodations. Allegations of Sexual Abuse and/or Sexual Harassment shall be forwarded to the Sexual Abuse Response Team (SART) and processed in accordance with SOP 208.06, Prison Rape Elimination Act - PREA Sexually Abusive Behavior Prevention and Intervention Program.

Grievance contained extra pages other than those allotted and had writing on the backside of a page.

Goal Devices including issuance, usage, access, loss or termination of privileges, repair or replacement of the tablets, etc.

☐ Grievance included threats, profanity, insults, or racial slurs that are not part of the offender's allegation.

I ACKNOWLEDGE RECEIPT OF THE ABOVE RESPONSE ON THIS DATE:

☐ Grievance was filed out of time frames as outlined in policy.

☐ Grievance contained more than one issue/incident.

Offender's Name: Brinson, Adrian

Offender's Signature (Date)

You have seven (7) calendar days within which to appeal this Response to your Grievance Coordinator. If the last day is not a business day at your institution, you may file it on the next day that is a business day.

Retention Schedule: Upon Completion, this form shall be maintained with the grievance packet for four (4) years and then destroyed.



Georgia Department of Corrections Office of Professional Standards P.O. Box 1529 Forsyth, Georgia 31029

ATTACHMENT 9 SOP 227.02

Brian P. Kemp Governor

Timothy C. Ward Commissioner

CENTRAL OFFICE APPEAL RESPONSE

Offender's Name: Brinson, Adrian

Grievance Number: 346064

GDC#: 1171205

Facility: Coastal State Prison

A member of my staff has reviewed your grievance. This review revealed that you failed to follow proper grievance procedures. SOP 227.02 states that the offender's complaint and requested relief must be stated legibly and in writing in the space provided and only one (1) additional page may be attached to the paper grievance form and the offender may write on only one (1) side of the page. This grievance was rejected at the institutional level in accordance with policy guidelines. Based on this information, this grievance is denied.

Commissioner's Designee, Southeast Region (cls) Office of Professional Standards	Date: 12/27/22	
I ACKNOWLEDGE RECEIPT OF THE ABOVE RESPONSE	E ON THIS DATE:	
Offender's signature	Date	



Georgia Department of Corrections Office of Professional Standards P.O. Box 1529 Forsyth, Georgia 31029

ATTACHMENT 9 SOP 227.02

Brian P. Kemp Governor

Timothy C. Ward Commissioner

CENTRAL OFFICE APPEAL RESPONSE

Offender's Name: Brinson, Adrian

Grievance Number: 346064

GDC#: 1171205

Facility: Coastal State Prison

A member of my staff has reviewed your grievance. This review revealed that you failed to follow proper grievance procedures. SOP 227.02 states that the offender's complaint and requested relief must be stated legibly and in writing in the space provided and only one (1) additional page may be attached to the paper grievance form and the offender may write on only one (1) side of the page. This grievance was rejected at the institutional level in accordance with policy guidelines. Based on this information, this grievance is denied.

Commissioner's Designee, Southeast Region (cls) Office of Professional Standards	Date: 12/27/22	
I ACKNOWLEDGE RECEIPT OF THE ABOVE RESPONS	E ON THIS DATE:	
Offender's signature	Date	

Pro Se 14	(Rev. 12/16	Complaint fo	r Violation of Civil	Rights (Prisoner)

A.		ve you filed other lawsuits in state or federal court dealing with the same facts involved in this ion?
		Yes
	V	No
В.		your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is re than one lawsuit, describe the additional lawsuits on another page, using the same format.)
	1.	Parties to the previous lawsuit
		Plaintiff(s)
		Defendant(s)
	2.	Court (if federal court, name the district; if state court, name the county and State)
	3.	Docket or index number
	4.	Name of Judge assigned to your case
	5.	Approximate date of filing lawsuit
	6.	Is the case still pending?
		Yes
		□ No
		If no, give the approximate date of disposition.
	7.	What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)
C.		eve you filed other lawsuits in state or federal court otherwise relating to the conditions of your prisonment? Habeas Corpus in State Challenging

Pro Se 14 (Rev. 12/16) Complaint for Violation of Civil Rights (Prisoner)					
Yes					
Yes No Was					
If your answer to C is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)					
1. Parties to the previous lawsuit Plaintiff(s) Adman L. Bonson Defendant(s) Amer South Agron Ponence					
2. Court (if federal court, name the district; if state court, name the county and State)					
Chathan County Georgia					
3. Docket or index number					
4. Name of Judge assigned to your case Name of Judge assigned to your case Norable Sohn to morse Sr.					
5. Approximate date of filing lawsuit					
6. Is the case still pending?					
Yes No					
If no, give the approximate date of disposition					
7. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?) Perding Relians of Sudge					

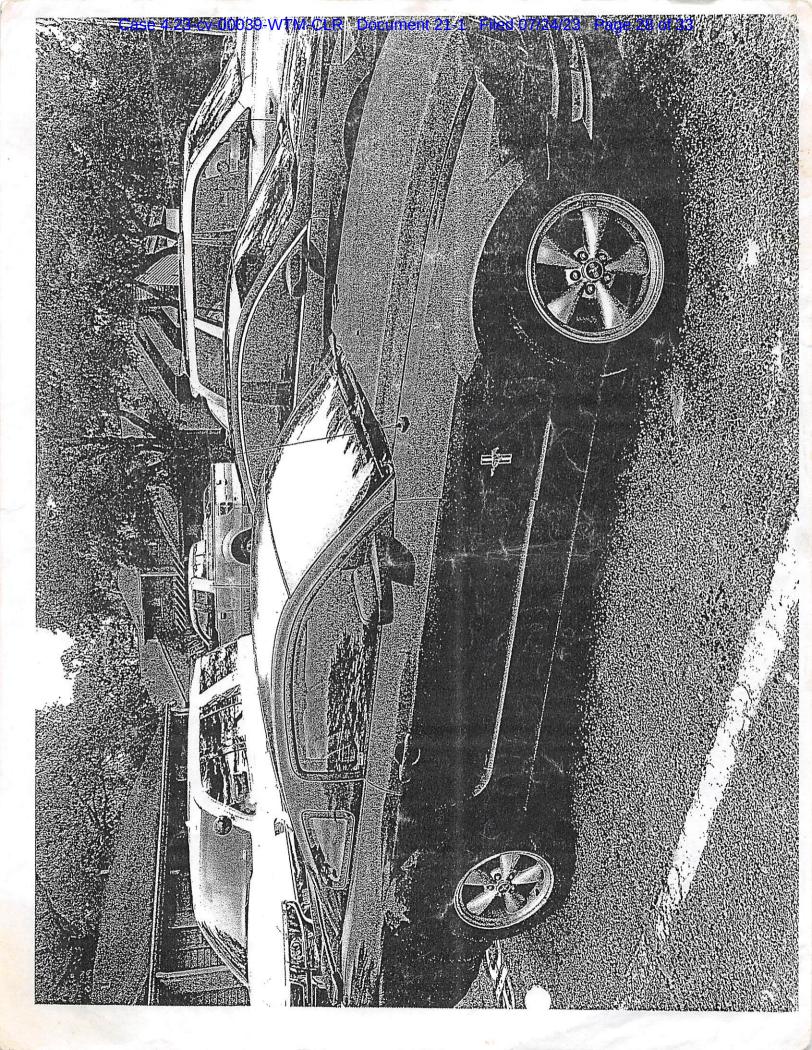
IX. Certification and Closing

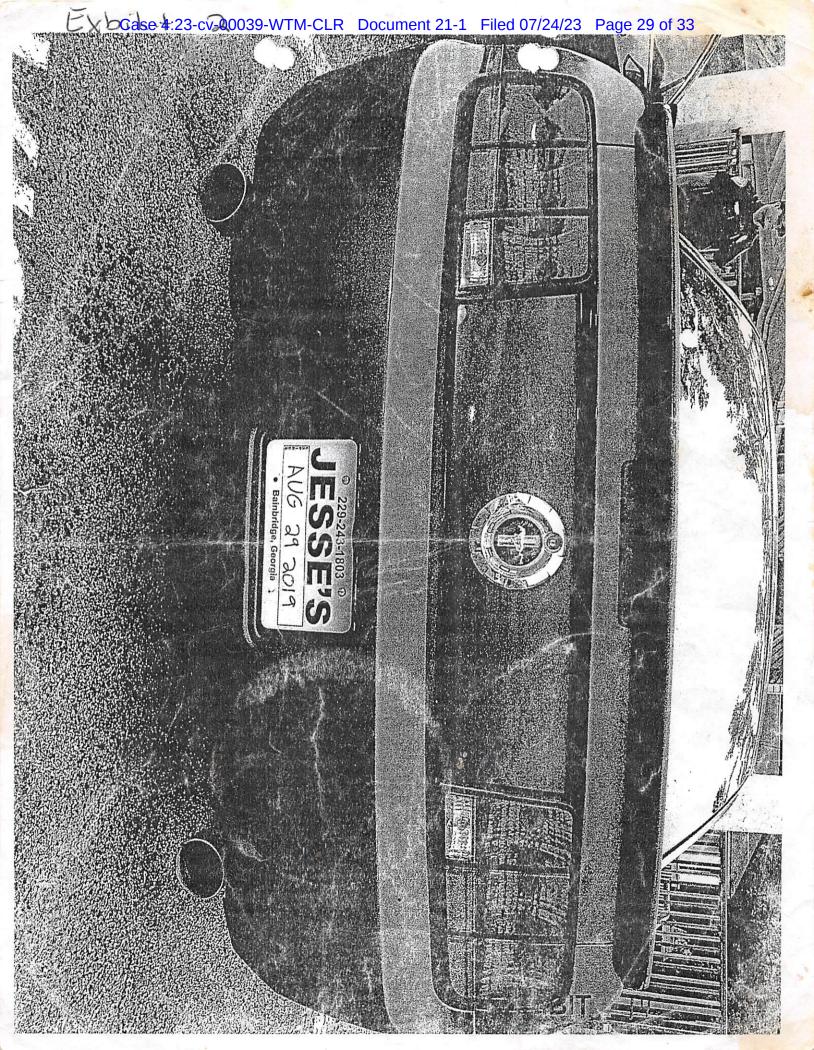
Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

	Date of signing:	23-23		
	Signature of Plaintiff Printed Name of Plaintiff Prison Identification # Prison Address	Adrian Lamas GOC 1171705 1400 Pulton m macon City	Brinson Rd Ga. State	31208 Zip Code
В.	For Attorneys			
	Date of signing:			
	Signature of Attorney			
	Printed Name of Attorney			
	Bar Number			
	Name of Law Firm			
	Address			
		City	State	Zip Code
	Telephone Number			
	E-mail Address			





STATE OF GEORGIA

CERTIFICATE OF SERVICE

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AFFIANT PRO, SE.
GDC# 11-1265
CENTRAL STATE PRISON
4600 FULTON MILL ED.
MACON, GEORGIA 31368

6039-WTM-CLR Document 21-1 Filed 07/24/23 F

CLI	R D	ocume	ent 21-1 Form bl-5007-ld wood	Fil
RECIEPT FOR GRIEVANCE AT COUNSELOR'S LEVEL	OFFENDER'S NAME: Brinson, Addian GDC I.D. #: 171905	DATE: 11 / 83 / 33 COUNSELOR'S SIGNATURE: 1 Milliams	RETENTION SCHEDULE: Upon completion of this form, it will be placed in a file in the Grievance Coordinator's office.	

21-1 ACKNOWLEDGE RECEIPT OF GRIEVANCE FORM FROM THE ABOVE INMATE DATE: 3 / 123 COUNSELOR'S SIGNATURE ABOVE INMATE COUNSELOR'S SIGNATURE PEcket for Recention Schedule: Upon Completion, this form shall be maintained with the grievance packet for the country of th ile OFFENDER'S NAME SELVISON, Adrian Recention Schedule: Upon Completion, this form shall be maintained with the grievance packet for four (4) years and then destroyed. RECEIPT FOR GRIEVANCE AT COUNSELOR'S LEVEL GDC L.D. #: 1/7/205